DOC Adopt-A-School Program

TUTOR APPLICATION

Name:	Office:	
Job Title:	Room Number:	Building:
Work phone: E-ma	il:	
Briefly describe the work you do at the Department:		
Fluent in the following foreign language/s:		
What subject/s are you interested in tutoring?		
Why do you believe you would be a good tutor?		
Describe any previous experience tutoring children:		
Describe any special interests that may be helpful in matching yo Special Education, etc.):	ou with a student (e.g., career	interests, hobbies, cultural,
Employee Signature	Date	
I grant approval for this employee to participate in the DOC Ado	pt-A-School Program during	g the 2003-2004 school year.
Supervisor Signature	Date	